## Alternative Certificate to Enter Group 1 Higher Physician Specialty Training 2022 Coverage by SAS boot camp, SCSChf 1-3 Nov 2021

### Monday workshop: Death and Dying

2.0 Communication with patient, relatives and carersIntroduces themselves to patient/carer/relative stating name and role; communicates clearly, politely, considerately, with understanding and empathy; ensures sufficient time and appropriate environment for communication; provides the necessary / desired information; AND communicates complex information clearly2.1 Communication with patientsChecks patients' understanding of options and supports patients in interpreting information and evidence relevant to their condition; AND responds to patients' queries or concerns2.2 Communication Uses appropriate styles of communication; breaks bad news
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<b>Z.Z COmmunication</b>   Uses appropriate styles of continuincation, breaks bad news
compassionately and supportively; AND manages three way
<b>in challenging</b> consultations e.g. with an interpreter, using sign language, or with a child
circumstances patient and their family/carers
<b>3.24 "Do not</b> Able to discuss decisions not to resuscitate with the multidisciplinary
resuscitate" orders team, the patient, long term carers (both medical and non-medical) and
relatives and then records the outcome of that discussion
<b>3.26 End of life care</b> Recognises that palliative care requires attention to physical,
psychological, emotional, social and spiritual aspects of the patient's
experience, and those close to them; helps patient to access this if
required; participates in discussions regarding personalised care
planning including symptom management and advance care plans with
patients, family and carers; AND discusses the patients' needs and
preferences regarding care in the last days of life, including preferred
place of care and death, treatment escalation plans, do not attempt
cardiopulmonary resuscitation (DNACPR) decisions

#### Wednesday workshop: Handover and documentation

2.3 Complaints	Acts to prevent/mitigate and minimise distress in situations which might lead to complaint or dissatisfaction; AND deals appropriately with angry/distressed/dissatisfied patients/carers and seeks assistance as appropriate
2.4 Patient records	Maintains accurate, legible and contemporaneous patient records AND ensures that entries are signed and dated
2.5 Working with other healthcare professionals	Works effectively within the wider healthcare team for the benefit of patient care; makes clear, concise and timely written and oral referrals to other healthcare professionals; AND produces timely, legible discharge summaries or outpatient letters that identify principle diagnoses, key treatments/interventions, medication and follow-up arrangements
2.6 Continuity of care	Allocates and prioritises tasks during handover; anticipates and identifies problems for the next clinical team/shift; AND takes pre-emptive action where required

#### **Immersive simulation scenarios**

3.1 Recognition of	Responds promptly to notification of deterioration or concern regarding a
acute illness	patient's condition; prioritises tasks according to clinical urgency AND
	reviews / reassesses patients in a timely manner

3.2 Assessment of	Performs rapid, focused assessment of illness severity including	
the acutely unwell	physiological monitoring and considering mental health aspects; AND	
patient	performs prompt, rapid, focused assessment of the patient who presents	
patient	an acute risk to themselves or to others in the context of mental disorder,	
	incapacity or incompetence	
3.3 Immediate	Initiates prompt appropriate management to stabilise/prevent further	
management of the	deterioration in patients with common acute presentations (including mental health) and seeks timely senior help with the further management;	
acutely unwell	identifies electrolyte imbalance and, with senior advice, delivers a safe	
patient	and effective method of correction; AND recognises when a patient	
patient	should be moved to a higher level of care and seeks appropriate	
	assistance with review and management	
3.9 Diagnosis	Formulates appropriate physical/mental health differential diagnoses,	
	based on history, examination and immediate investigations; AND takes	
	account of probabilities in ranking differential diagnoses	
3.10 Clinical	Refines problem lists and management plans; AND develops appropriate	
management	strategies for further investigation and management	
3.11 Clinical review	Undertakes regular reviews, amends differential diagnosis and expedites	
	patient investigation and management in light of developing symptoms	
	and in response to therapeutic interventions; AND reprioritises problems	
	and refines strategies for investigation and management	
3.23 Cardiac and	Trained to perform immediate adult life support comprising	
respiratory arrest	cardiopulmonary resuscitation, simple airway management and safe	
	defibrillation <i>or</i> basic paediatric life support and to adapt resuscitation when appropriate; demonstrates the performance of advanced life	
	support including cardiopulmonary resuscitation, manual defibrillation and	
	management of life-threatening arrhythmias; AND is able to lead the	
	resuscitation team where necessary	
Advanced CPR	Leadership of CPR team	
Direct current	Skills lab level	
cardioversion		
	Skills lab level	
Temporary cardiac	SKIIIS IAD IEVEI	
pacing using an		
external device		
Access to circulation	Intraosseous to skills lab level	
for resuscitation		
(femoral vein or		
intraosseous)		

# Procedural skills sessions

Central venous cannulation	Skills lab level (Tuesday)
Pleural aspiration for fluid (diagnostic)	Skills lab level (Wednesday)
Pleural aspiration (pneumothorax)	Skills lab level (Wednesday)
Intercostal drain for pneumothorax	Skills lab level (Wednesday)
Intercostal drain for effusion	Skills lab level (Wednesday)
Nasogastric (NG) tube	Skills lab level (Tuesday)
Ascitic tap	Skills lab level (Tuesday)
Abdominal paracentesis	Skills lab level (Tuesday)
Lumbar puncture	Skills lab level (Monday)